24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Black Conservatives Fund			
	C C00560599		
Check if 24-hour report 48-hour report New report Amends report filed on			
Full Name of Payee	Date of Public Distribution/Dissemination		
14A Digital	M M / D D / Y Y Y Y		
Mailing Address 1 Scott circle, NW	12 02 2014 Amount		
City State Zip Code	1740.00		
Washington DC 20036	Transaction ID: SE.22542 Date of Disbursement or Obligation		
Purpose of Expenditure IE Ad Production - Non Contribution Acct Category/ Type	12 02 / 2014		
Name of Federal Candidate Support Office	e Sought: House District: 00		
WILLIAM CASSIDY Oppose	President State: LA		
Calendar Year-To-Date Per Election for Office Sought Disbut	ursement For: Primary General		
	X Other (specify) ▶		
Full Name of Payee Active Engagement	Date of Public Distribution/Dissemination		
Mailing Address 44084 Riverside Pkwy	12 02 2014		
Mailing Address 44084 Riverside Pkwy	Amount		
City State Zip Code	500.00		
Lansdowne VA 20176	Transaction ID : SE.22543 Date of Disbursement or Obligation		
Purpose of Expenditure LE Converting Non Contribution Account Category/	M M / D D / Y Y Y Y		
IE Copywriting - Non Contribution Account Type	12 02 2014		
Name of Federal Candidate Support Office	e Sought: House District: 00		
MARY L LANDRIEU Oppose	President State: LA		
	ursement For: Primary General		
Per Election for Office Sought 57658.52 2014	X Other (specify) ▶ Runoff		
(a) SUBTOTAL of Itemized Independent Expenditures	2240.00		
	7 7 7		
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7		
(c) TOTAL Independent Expenditures			
	792 1 292 1 275		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Patrick Krason	M / D D / Y Y Y Y		
[Electronically Filed] Date 1	2 02 2014		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	neo	PAGE 2 OF 5 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FE	EC IDENTIFICATION NUMBER ▼	
Black Conservatives Fund		C00560599	
Check if 24-hour report 48-hour report New report Amends report filed on			
Full Name of Payee Bonnie Blue Strategies	M		
Mailing Address 530 Lakeland Dr	12 Amount	02 2014	
City State Zip	Code	1200.00	
Baton Rouge LA 708	10 Transact	tion ID : SE.22545 Disbursement or Obligation	
Purpose of Expenditure IE GOTV Consulting - Non Contribution Account	tegory/ Type 12	M / D D / Y Y Y Y	
Name of Federal Candidate	Support Office Sought:	House District: 00	
WILLIAM CASSIDY	Oppose President	Senate State: LA	
Calendar Year-To-Date Per Election for Office Sought 5150	Disbursement F 2014 Othe	or: Primary General or (specify) ▶ Runoff	
Full Name of Payee Cross Strategies	Date of	Public Distribution/Dissemination	
	12		
Mailing Address 13819 Oak Bend dr	Amount		
City State Zip	Code	1000.00	
Baker LA 707		on ID : SE.22547 Disbursement or Obligation	
Purpose of Expenditure IE Communications Strategy Consulting - Non Contribution Account	tegory/ Type 12		
Name of Federal Candidate	Support Office Sought:	House District:00	
WILLIAM CASSIDY	Oppose President	Senate State: LA	
Calendar Year-To-Date Per Election for Office Sought	Disbursement F 2014 Other	or: Primary General Primary Runoff	
(a) SUBTOTAL of Itemized Independent Expenditures		2200.00	
(b) SUBTOTAL of Unitemized Independent Expenditures	· · · · · · · · · · · · · · · · · · ·	7 1 7 1 7	
(c) TOTAL Independent Expenditures	· · · · · · · · · · · · · · · · · · ·	7	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Patrick Krason [Electronically Signature	Filed] Date 12	02 2014	
- J			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	A LINDITOTILO	PAGE 3 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Black Conservatives Fund		C C00560599
		0 0000000
Check if 24-hour report 48-hour report	New report Amends report file	d on Mam / Dab / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
Hayride Media LLC		12 02 / 2014
Mailing Address 9007 Hayride Rd		Amount
City State	e Zip Code	600.00
Baton Rouge LA	·	Transaction ID : SE.22548
Purpose of Expenditure	Category/	Date of Disbursement or Obligation
IE Banner Ads - Non-Contribution Account	Type	12 02 2014
Name of Federal Candidate	Support Office	ce Sought: House District: 00
WILLIAM CASSIDY	Oppose	President Senate State: LA
Calendar Year-To-Date		oursement For: Primary General
Per Election for Office Sought	49908.52	Other (specify) Number Runoff
Full Name of Payee Mallory Kennedy Consulting		Date of Public Distribution/Dissemination
		12 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 1064		Amount
City State	·	4650.00
Baton Rouge LA	70821	Transaction ID : SE.22549 Date of Disbursement or Obligation
Purpose of Expenditure IE Strategy Colsultibng - Non Contribution Account	Category/ Type	12 02 7 2014
Name of Federal Candidate	Support Offi	ce Sought: House District: 00
WILLIAM CASSIDY	Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought	57158.52 Dis	bursement For: Primary General A Other (specify) ▶ Runoff
		✓ Other (specify) Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	·····	5250.00
(b) SUBTOTAL of Unitemized Independent Expenditures	•	7 7 7
(c) TOTAL Independent Expenditures		
(6) 1011-2	•	7 7
Under penalty of perjury I certify that the independent exp with, or at the request or suggestion of, any candidate or a party committee) any political party committee or its agent.	authorized committee or agent of eith	
Patrick Krason	[Electronically Filed] Date	12 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 4 OF 5 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Black Conservatives Fund	C C00560599		
Check if 24-hour report 48-hour report New report Amends report filed on			
Full Name of Payee	Date of Public Distribution/Dissemination		
Phoenix Flight Media Mailing Address	12 02 7 2014		
Mailing Address	Amount		
City State Zip Code	400.00 Transaction ID : SE.22550		
Durance of Europediture	Date of Disbursement or Obligation		
Purpose of Expenditure GOTV Consulting - Non Contribution Account Category/ Type	12 / DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate Support Office	Sought: House District: 00		
WILLIAM CASSIDY Oppose	President State: LA		
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	rrsement For:		
Full Name of Payee	Date of Public Distribution/Dissemination		
Lee Stranahan	12 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address	Amount		
City State Zip Code	3500.00 Transaction ID : SE.22551 Date of Disbursement or Obligation		
Purpose of Expenditure IE Digital Ad Production - Non Contribution Account Category/ Type	12 / 01 / 2014		
Name of Federal Candidate Support Office	e Sought: House District: 00		
MARY L LANDRIEU Oppose	President State: LA		
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	rsement For: Primary General Other (specify) ► Runoff		
(a) SUBTOTAL of Itemized Independent Expenditures	3900.00		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Patrick Krason [Electronically Filed] Date	2 02 / 2014		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	ones	PAGE 5 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Black Conservatives Fund		C C00560599
Check if X 24-hour report 48-hour report New re	port Amends repo	rt filed on
Full Name of Payee William Tidwell		Date of Public Distribution/Dissemination
Mailing Address 500 Roosevelt Blvd		12 02 2014 Amount
City State	Zip Code	523.32
Falls Church VA	22044	Transaction ID : SE.22552 Date of Disbursement or Obligation
Purpose of Expenditure IE Digital Ads - Non Contribution Account	Category/ Type	12
Name of Federal Candidate	X Support	Office Sought: House District: 00
WILLIAM CASSIDY	Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought	47568.52	Disbursement For:
Full Name of Payee		Date of Public Distribution/Dissemination
Mailing Address		Amount
		Allount
City State	Zip Code	
Purpose of Expenditure		Date of Disbursement or Obligation
ruipose oi Experiantile	Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For:
-		
(a) SUBTOTAL of Itemized Independent Expenditures		523.32
(b) SUBTOTAL of Unitemized Independent Expenditures		·
(c) TOTAL Independent Expenditures		14113.32
Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
	nically Filed] Date	12 02 2014
Signature		